

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H89541

FILED
Feb 22, 2011
Secretary of State

Entity Name: DIRECT NURSING CARE SERVICES, INC.

Current Principal Place of Business:

3200 N. FEDERAL HWY.
SUITE #106
BOCA RATON, FL 33431 US

New Principal Place of Business:

Current Mailing Address:

3200 N. FEDERAL HWY.
SUITE #106
BOCA RATON, FL 33431 US

New Mailing Address:

FEI Number: 59-2440238

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SALKEY, ELAINE
20179 OCEAN KEY DR
BOCA RATON, FL 33498 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: SALKEY, ELAINE
Address: 20179 OCEAN KEY DR
City-St-Zip: BOCA RATON, FL 33498

Title: VP
Name: SADDLER, PATRICIA
Address: 212178 AVE
City-St-Zip: MARGATE, FL

Title: ST
Name: SALKEY, ELAINE
Address: 20179 OCEAN KEY DR
City-St-Zip: BOCA RATON, FL 33498

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ELAINE SALKEY

PRES

02/22/2011

Electronic Signature of Signing Officer or Director

Date